Proceedings Series of Educational Studies

The 5th International Conference on Educational Management and Technology (ICEMT) 2026

Menstrual Hygiene Practices among Adolescent Girls with Mild Intellectual Disability at SLB C Autis Negeri Kedungkandang, Malang City

Revalina Gadis Salsabila[1], Tsabita Rahma[2], Teresia Newshinta Geraldine[3], Fina Shafwatul Mawaddah[4], Rizqi Fajar Pradipta[5]

State University of Malang, Jl. Semarang No. 5 Malang, East Java, Indonesia

Author of Corresponden ,Email: rizqi.fajar.fip@um.ac.id

Abstract

Menstruation is a natural biological process experienced by all women during their productive years. Menstrual hygiene management is an important aspect of reproductive health. The purpose of this study was to describe menstrual hygiene practices during menstruation in adolescent girls with mild intellectual disabilities at SLB C Autism Kedungkandang. This study used a descriptive qualitative approach with a case study method chosen to describe in depth the menstrual hygiene practices of adolescent girls with mild intellectual disabilities, as well as to identify variations in abilities between individuals as a basis for recommendations for more personalized and adaptive interventions. In addition to practice, interviews were also conducted online with the homeroom teachers of both subjects to obtain more comprehensive information about the menstrual hygiene management abilities of both subjects in their daily lives at school. The results of this study indicate that the two adolescent girls with mild intellectual disabilities at SLB C Autism Kedungkandang have different levels of ability in practicing menstrual hygiene, especially in using sanitary napkins. In addition, the role of teachers, parental cooperation, and a responsive school environment are very important in helping students learn menstrual hygiene. Using effective learning methods will also increase children's independence in learning about maintaining personal hygiene during menstruation (menstrual hygiene).

Keywords: menstrual hygiene; adolescent girls; intellectual disabilities; menstrual hygiene; special needs schools

1. Introduction

Menstruation is a natural biological process experienced by all women during their reproductive years. Menstrual hygiene management is an important aspect of reproductive health, given that hygiene practices that are not carried out correctly and appropriately can increase the risk of reproductive tract infections, pelvic inflammatory disease, and even cervical cancer (Hasnur, 2025). Menstrual hygiene refers to women's and adolescent girls' ability to use clean menstrual materials, change pads regularly under conditions that maintain privacy, use clean water, have access to adequate facilities for disposing of menstrual waste, and understand the basics of the menstrual cycle (Wilbur et al., 2021). However, meeting menstrual hygiene needs remains a global challenge, particularly for women with disabilities, who face barriers arising from the stigma of disability compounded by the stigma surrounding menstruation itself (Wilbur et al., 2021).

This work is licensed under a Creative Commons Attribution-ShareAlike 4.0 International License.

Globally, the population of persons with disabilities is approximately 1.3 billion people, or 16% of the world's population, and this figure is even higher in developing countries, including Indonesia, where the prevalence of persons with disabilities increased from 2.45% in 2012 to 5% in 2020 (Hasnur, 2025). Adolescent girls with intellectual disabilities are particularly vulnerable when it comes to menstrual hygiene, as their cognitive limitations hinder their understanding of the menstrual process and the self-care skills required (Kaliszewski et al., 2016; Puspitasari et al., 2020). Adolescents with intellectual disabilities are generally characterized by an Intelligence Quotient (IQ) score below 70–75, reflecting limitations that require close attention not only in intellectual functioning but also in adaptive skills essential for daily life, such as the ability to communicate, care for oneself, and interact socially (Hasnur, 2025). Menstrual hygiene among adolescents with intellectual disabilities remains at a low level, a condition influenced by knowledge, attitudes, parental support, and access to information (Hasnur, 2025).

Prior literature has made important contributions to understanding the dynamics of menstrual hygiene management (MHM) among persons with disabilities. Wilbur et al. (2021) conducted a systematic review of 22 studies and identified various barriers to menstrual hygiene among persons with disabilities, including the absence of standard guidelines for professional caregivers, a lack of training and information on menstrual hygiene provided to persons with intellectual disabilities and their caregivers, and limited understanding of the severity of premenstrual symptoms experienced. The review also found that the strategies employed by caregivers to address menstrual hygiene challenges were often restrictive, such as limiting physical mobility during menstruation or suppressing menstruation through long-term contraception or even sterilization, which constitutes a violation of the human rights of persons with disabilities (Wilbur et al., 2021).

A qualitative study by Wilbur et al. (2021) conducted in the Kavrepalanchok district, Nepal, reinforced these findings by showing that barriers to menstrual hygiene vary according to the type of disability. Persons with mobility disabilities faced challenges in accessing sanitation facilities independently; persons with intellectual disabilities had difficulty understanding and remembering menstrual hygiene information, requiring caregivers to repeatedly provide explanations each month; while persons with visual disabilities had difficulty detecting bloodstains on clothing and disposing of menstrual products hygienically. The study also revealed that no support mechanisms existed for caregivers regarding menstrual hygiene, leaving them often feeling overwhelmed and isolated, while information on menstrual hygiene was frequently deliberately withheld from persons with intellectual disabilities based on the assumption that they would not be able to understand it (Wilbur et al., 2021).

At the policy level, Wilbur et al. (2021) analyzed the inclusiveness of menstrual hygiene policy in Nepal toward persons with disabilities using the EquiFrame framework, and found that of 274 references to gender or disability across the policy documents reviewed, only 12% related to disability, and only two references specifically addressed disability issues within the context of menstrual hygiene. This condition reflects the systemic marginalization of persons with disabilities in menstrual hygiene interventions, where existing school-based menstrual hygiene programs fail to reach children with disabilities who are often not enrolled in school, while service providers lack adequate training to support the menstrual hygiene needs of persons with disabilities (Wilbur et al., 2021). At the level of community-based practical interventions, Heryati et al. (2024) showed that actively involving parents through counseling

and mentoring programs at SLBN A Citeureup improved parents' knowledge, understanding, and skills in supporting the menstrual hygiene of adolescent girls with disabilities. Before the program, only 28.6% of participants had knowledge of reproductive health for adolescents with disabilities; after the program, this figure rose to 75%. The program, which used a persuasive-educational approach with direct demonstration and simulation, proved most effective, particularly in improving understanding of proper pad use, which reached 100% after the intervention (Heryati et al., 2024). In Indonesia, Hasnur (2025) demonstrated that reproductive health counseling using lecture methods and PowerPoint media effectively improved the knowledge of adolescent girls with intellectual disabilities at SLBN Banda Aceh regarding menstrual hygiene, with the average knowledge score increasing from 33.00 before the intervention to 64.33 after the intervention, a statistically significant difference ($p = 0.002$).

Although these studies have provided an important foundation, a research gap remains unaddressed. Most previous research has focused on the effectiveness of counseling interventions on knowledge, general barriers to menstrual hygiene across various types of disabilities, or the role of caregivers and parents, but has not yet deeply explored the variation in actual menstrual hygiene practice abilities among individuals with mild intellectual disabilities within the context of special needs schools in Indonesia, particularly through an approach combining direct practice observation and teacher interviews comparing abilities across individuals (Wihdaturrahmah & Chuemchit, 2023). This article focuses on examining menstrual hygiene practices directly among adolescent girls with mild intellectual disabilities through a combination of in-depth interviews with teachers and direct observation of student practice, in order to identify variations in menstrual hygiene ability among individuals as a basis for developing more personalized and adaptive mentoring strategies tailored to each student's characteristics, specifically among first-year junior high school (SMP) students with mild intellectual disabilities at SLB C Negeri Kedungkandang.

2. Method

This study employed a descriptive qualitative approach using a case study method. This approach was chosen because it aims to describe in depth the menstrual hygiene practices of adolescent girls with mild intellectual disability, as well as to identify variations in ability among individuals as a basis for recommending more personalized and adaptive interventions. The case study method was used because it is capable of understanding a phenomenon or issue within its natural research context (Assyakurrohim et al., 2022; Nurahma & Hendriani, 2021). This study was conducted at SLB C Autis Negeri Kedungkandang in May 2026. The research subjects were two first-year junior high school (SMPLB) adolescent girls who had experienced menstruation and were diagnosed with mild intellectual disability. Subjects were selected through purposive sampling, meaning selection based on specific considerations relevant to the research objectives (Wahyuni & Diana Harisa, 2020). The inclusion criteria for subjects were: (1) adolescent girls with mild intellectual disability who had already experienced menstruation; (2) actively enrolled as students at SLB C Autis Negeri Kedungkandang; (3) able to understand simple instructions; and (4) not currently undergoing medical treatment intended to stop or disrupt the menstrual cycle. Subject A is an adolescent girl with mild intellectual disability who has high initiative and experiences only minor learning obstacles. Subject B is an adolescent girl with mild intellectual disability who also has scoliosis, which affects her gross motor abilities.

Data collection techniques used in this study consisted of two main methods: direct practice observation and in-depth interviews. First, direct practice observation was conducted to observe both subjects' ability to independently apply a sanitary pad. The observation was carried out on 13 May 2026 by instructing each subject to attach a sanitary pad to the underwear provided. The researchers observed and documented each stage of the pad-application practice, from taking the pad to disposing of its wrapper in the trash, with a naturalistic assessment based on standard menstrual hygiene management practices (Heryati et al., 2024). In addition, in-depth interviews were conducted online with the homeroom teachers of both subjects to obtain information about their menstrual hygiene abilities in daily life at school. The interviews covered aspects of independence during menstruation, menarche experience, understanding of pad use, obstacles experienced, motor ability, teachers' learning strategies, and environmental support, structured according to a conceptual framework of menstrual hygiene covering the dimensions of knowledge, skills, and environmental support (Heryati et al., 2024; Wahyuni & Diana Harisa, 2020). The data analysis technique used was descriptive qualitative analysis. Observational data on practice were analyzed based on the achievement of each stage of pad application, categorized as independently capable, capable with assistance, or not yet capable. Interview data were analyzed using a thematic approach with the following stages: (1) data reduction, i.e., selecting and focusing on relevant data; (2) data presentation in the form of descriptive narrative and tables; and (3) drawing conclusions based on a comparison of menstrual hygiene abilities between the two subjects. Data triangulation was carried out by comparing the results of direct practice observation with the results of the homeroom teacher interviews to obtain a more comprehensive and valid picture of each subject's menstrual hygiene ability.

3. Results and Discussion

3.1 Result

The study was conducted at SLB C Negeri Kedungkandang, located at Jl. H. Ali Nasrudin No. 2, Kedungkandang, Kedungkandang District, Malang City, East Java 65137, involving two first-year junior high school adolescent girls with intellectual disabilities who had already begun menstruating. On 13 May 2026, the researchers conducted a practice session with the two adolescent girls on how to properly and correctly apply a sanitary pad, and conducted an online interview with their homeroom teacher to learn more about how the two students maintain their menstrual hygiene.

3.1.1 Characteristics of the Students

Preliminary data obtained by the group can be seen in the following table.

Table 1. Interview Results on Subject Characteristics

Characteristic	Subject A	Subject B
Grade	1st year SMPLB	1st year SMPLB
Level of Disability	Mild intellectual disability	Mild intellectual disability
Initial Knowledge of Menstruation	Fairly understanding	Fairly understanding
Characteristics	Good initiative and only minor learning obstacles; quiet	Has scoliosis, hindering gross motor movement; somewhat shy

Table 1 shows the characteristics of the two research subjects. Subject A, who has a mild intellectual disability, had fairly good initial knowledge of menstruation; when asked questions about menstruation, Subject A was able to answer calmly and appropriately. Subject A also recognized the items brought by the researchers for the practice session, such as pads and underwear. In contrast, Subject B, who has a mild intellectual disability along with scoliosis that hinders her gross motor skills, had fair knowledge but still seemed hesitant when answering the researchers' questions. Before beginning the practice stage, the researchers asked whether the students were already able to apply a pad independently; Subject A answered that she could already apply a pad independently, while Subject B had never applied one on her own before. The following are the results of the pad-application practice. Subject A has good initiative and is not shy, only quiet. Subject B, in addition to having scoliosis that hinders her gross motor movement, is also shy, which caused her to take a long time to initiate communication and complete her tasks, even though she was actually capable

3.1.2 Sanitary Pad Application Practice

The pad-application practice carried out by both subjects, following the researchers' guidance, was intended to assess the extent of the students' ability to maintain personal hygiene during menstruation. In the initial stage, the researchers introduced themselves and built rapport with both subjects to create a conducive and non-stressful atmosphere for the students. The researchers then began asking questions the students could answer, such as their initial understanding of menstruation and the items used to maintain hygiene during menstruation, or questions about activities they had done before the researchers arrived. The results showed that the students already knew what menstruation was, having experienced it since 6th grade of elementary school. Both subjects were also already familiar with underwear and sanitary pads used to maintain hygiene during menstruation.

After building rapport with the students, the practice began with the researchers observing and documenting each stage of the practice, which included: (1) taking a pad; (2) opening the pad wrapper; (3) removing the pad's adhesive backing paper; (4) attaching the pad to the underwear in the correct position; (5) opening the adhesive backing paper on the wings and attaching the wings; and (6) tidying up and disposing of the wrapper in the trash. Assessment was conducted naturalistically, based on criteria developed from standard menstrual hygiene management practices. The following presents the results of the observation of the pad-application practice conducted by both subjects.

Table 2. Observation Results of Sanitary Pad Application Practice

No	Characteristic	Subject A	Subject B
1	Taking the pad from storage and the provided underwear	Able to take it correctly and without hesitation	Still hesitant from the very beginning
2	Opening the pad wrapper	Able to open the wrapper slowly and correctly	Did not understand how to open the pad and began by tearing a part that was not the adhesive seal
3	Removing the pad's adhesive backing paper	Already able to remove the backing paper properly	Because the wrapper was opened by tearing the middle section, removing the backing

			paper was also not done from the edge and appeared messy
4	Attaching the pad to the underwear in the correct position	Able to attach the pad to the underwear correctly and neatly	Able to attach the pad to the underwear correctly, but the process took a very long time and was untidy
5	Opening the wing's adhesive backing and attaching the wings to the sides	Already understands how to open the wing's backing and attach it correctly and neatly	Already understands how to open the wing's backing but is still hesitant when attaching the wings to the sides; result still untidy
6	Tidying up the wrapper and disposing of it in the trash	Able to tidy up the trash independently but did not dispose of it in the trash bin	Trash was not tidied, only crumpled and piled together with Subject A's trash
7	Washing hands after finishing	Did not take the initiative to wash hands	Did not take the initiative to wash hands

From the practice results of the two first-year junior high school girls, it was found that Subject A was broadly able to apply the pad correctly, neatly, and without assistance. At home, Subject A also always applies the pad independently during menstruation, indicating that Subject A is already able to maintain menstrual hygiene independently. This differs from Subject B, who was still hesitant even from the stage of taking the pad and underwear. Subject B required more time to be able to attach the pad to the underwear independently. Subject B did not yet understand how to open the pad correctly and was still untidy in applying it. Based on the answers to questions posed to Subject B, it turned out that during menstruation the pad was always applied by her mother, indicating that Subject B has not yet become independent in applying the pad to her underwear. After applying the pad, Subject A was able to tidy up her trash without being instructed to do so, but did not take the initiative to wash her hands without instruction. For Subject B, after applying the pad, the trash was only crumpled up and piled together with Subject A's trash; Subject B also had no initiative to wash her hands without instruction after applying the pad. In addition to conducting the practice session with the two subjects, the researchers also conducted an online interview with the homeroom teacher of both subjects; the results of this interview are presented in the following table.

3.1.3 Interview with Homeroom Teacher on Students' Menstrual Hygiene

After observing the students' practice in applying pads as a menstrual hygiene practice among adolescent girls with mild intellectual disability, the researchers interviewed the homeroom teacher to learn more about the students' understanding and independence in maintaining menstrual hygiene in their daily life at school. The interview was conducted online on 24 May 2026; the following table presents the results of the interview conducted. The interview guide was developed based on relevant aspects of menstrual hygiene, including: ability for independent self-care during menstruation, first menstruation history, the subject's response at menarche, prior experience with menstrual hygiene education, understanding and ability to use pads, obstacles experienced, motor ability, level of independence, learning strategies applied by the teacher, differences in ability between subjects, and the teacher's hopes for the subjects' development.

Table 3. Interview Results with Homeroom Teacher on Students' Menstrual Hygiene

NO	Interview Question	Answer
1	How capable are the students of caring for themselves independently, especially during menstruation?	In general, the children are independent in self-care, including during menstruation. What I have observed is that during menstruation, the children stay clean from morning until they go home. During menstruation, they are aware of their condition and tend to avoid play that involves a lot of movement.
2	Since when have the students begun menstruating?	I don't know exactly, but I once asked, and it started around 6th grade of elementary school.
3	What was the students' response when they first experienced menstruation?	The students' response when they first got their period was shock and confusion, but the children were quite open about it individually and received explanations from their teacher.
4	Have the students previously been taught about menstrual hygiene?	The children were previously taught when the school brought in a doctor from the local health center (puskesmas) as a resource person, who taught about puberty and personal hygiene care, particularly of the genital area.
5	What is the students' level of understanding regarding the use of sanitary pads?	Both students' understanding is good, but Subject A is already independent in applying and changing the pad, while Subject B still needs help, given that they have mild intellectual disability.
6	What obstacles do the students usually experience when applying or changing pads?	Currently Subject A does not experience difficulty because she is already used to it, but Subject B is still not independent when applying
7	What is the students' motor ability like when practicing pad application?	Regarding fine motor skills, such as applying and removing the pad, Subject B has some difficulty putting on underwear because of her scoliosis condition.
8	Do the students need full assistance, partial assistance, or are they already independent during practice?	Subject A is already independent, but Subject B still needs partial assistance. Overall, the children are independent, because they are able to understand and process the information conveyed by the teacher well. They only need to be reminded when the pad is full and needs changing, so as not to leak.
9	What are the students' behavioral characteristics when given direct	The children follow the lessons and practice well.

	practical instruction?	
10	What strategies or methods does the teacher typically use to teach self-care skills to the students?	The strategies used by the teacher in self-care instruction are: a. Task analysis (breaking activities into steps). b. Modeling method (the teacher demonstrates directly). c. Prompting and fading (providing assistance and gradually reducing it). d. Drill method and repeated practice. e. Use of visual media and concrete objects. f. Learning in real-life settings. g. Cooperation with parents.
11	Is there a difference in ability between the two students in understanding menstrual hygiene practices?	No, they both already understand; it's just that Subject B still needs help with applying the pad. They also need to be reminded to change it so it doesn't leak, and to wash their hands after changing.
12	In your opinion, can students with mild intellectual disability be trained to be more independent in maintaining menstrual hygiene?	Children with mild disabilities can be trained to be independent in maintaining hygiene during menstruation, but they still need to be continually reminded. Parents also play an important role in the success of a child's independence.
13	What are your hopes regarding menstrual hygiene practice instruction for the students?	My hopes are: a. That the children become more independent and confident (independent in applying and changing pads, and brave enough to ask questions and request help from teachers or parents). b. That there is a change in behavior (students are not disgusted, know how to maintain hygiene, i.e., washing hands after changing pads, and know how to dispose of pads properly). c. Good cooperation with parents in teaching the child's independence.

Based on the interviews conducted with the homeroom teacher, it can be seen that both students already understand menstrual hygiene; during their periods, both subjects remain clean from the start of the school day until they go home. However, both subjects still need to be reminded to change their pads when full and not to forget to wash their hands. Both subjects are also aware that during menstruation they should avoid play that requires a lot of movement. According to the teacher, the students began menstruating around 6th grade of elementary school when asked when it started, and their initial response was shock and confusion. However, because the students were open with their teacher, the teacher was able to explain what was happening clearly. Both subjects had previously received lessons on puberty and menstrual hygiene care when the school brought in a doctor from the local health center as a resource person.

Both subjects' understanding of menstruation is good, and in practice Subject A is already very independent, while Subject B still needs assistance in applying the pad and

underwear due to her scoliosis condition. The teacher employs several strategies in self-care instruction: task analysis, breaking activities into steps to make them easier for students to understand; the modeling method, in which the teacher demonstrates directly in front of the students; providing prompting and fading, i.e., giving assistance and gradually reducing it; using the drill method and repeated practice; using visual media and concrete objects; conducting lessons in real-life settings; and cooperating with parents. Although both subjects have mild intellectual disabilities, they can still be taught self-care in maintaining menstrual hygiene and only occasionally need to be reminded. In addition, the role of parents is also very important for the success of each student's independence.

The homeroom teacher hopes that through instruction in menstrual hygiene practice, both subjects will become even more independent, willing to ask questions, and willing to request help when needed. The students should not feel disgusted and should know how to maintain hygiene, such as washing their hands after changing pads and disposing of waste correctly. In addition, ongoing cooperation with the students' parents is needed to support the students' independence.

3.2 Discussion

3.2.1 Characteristics of the Students

The results of the study show that the two adolescent girls with mild intellectual disability at SLB C Negeri Kedungkandang have different levels of ability in practicing menstrual hygiene, particularly in applying pads. Subject A is overall able to apply pads independently and neatly, while Subject B still requires assistance and needs more time at each stage. This difference in ability aligns with the findings of Indriyani and Sukinah (2026), who stated that adolescent girls with mild intellectual disability experience difficulty managing menstrual hygiene, from pad use and change frequency to hygienic disposal of pads. The obstacles experienced by Subject B stem not only from her intellectual disability but are also influenced by her scoliosis condition, which affects her gross motor ability. This reinforces the statement by Jenisha et al. (2026) that challenges in menstrual hygiene management among adolescents with intellectual disability are influenced not only by biological factors but also by physical conditions and other factors. That study found that more than half of the subjects were fully dependent on caregivers for menstrual hygiene. This dependence was significantly higher among individuals with moderate intellectual disability, although in the present study both subjects were in the mild category.

The difference in independence between Subject A and Subject B is influenced by habits at home. Subject A is accustomed to applying pads herself during menstruation, whereas Subject B always requires assistance from her mother. This reflects how significant a role parents play in shaping a child's independence. Heryati et al. (2024) emphasized that parental support plays a crucial role for adolescent girls in managing menstrual hygiene. Parents who are accustomed to directly assisting without providing independence training will actually reinforce dependence, as occurred with Subject B. This finding is consistent with the results of research by Sari et al. (2023) at SLB Negeri 12 Jakarta, which found that female students tend not to be trained toward independence at home because parents choose to directly assist them, so the child's independence does not develop optimally. Parenting patterns at home also influenced Subject B's initial lack of independence, as she was accustomed to being assisted by

her mother in applying pads. An overprotective parental attitude that directly takes over the task of self-care actually hinders the development of a child's motor skills and self-confidence. Based on the analysis by Nafikadini and Paramarta (2021), an overindulgent maternal parenting style regarding reproductive organ hygiene has been shown to significantly decrease the independence level of adolescents with intellectual disability while at school. This is further supported by the findings of Elfiyani et al. (2024), which showed that mothers of adolescent girls with physical and intellectual disabilities never sought information about menstrual hygiene, whether through social media or by attending reproductive health seminars or training.

3.2.2 Sanitary Pad Application Practice

From the practice results, it was found that neither Subject A nor Subject B took the initiative to wash their hands after applying the pad, and Subject B did not clean up the pad's leftover wrapper. This finding is consistent with the results of the homeroom teacher interview, which indicated that both students need reminders to change their pads once full and to wash their hands afterward. This condition was also found in the study by Harisa and Wahyuni (2020) conducted at SLB Negeri 3 Central Jakarta, in which female students with intellectual disability experienced difficulty using pads and cleaning up afterward, indicating the need for specific methods to improve their independence in menstrual hygiene practice.

An evaluation finding of this study is the weak maintenance of supporting hygiene behaviors. Neither subject had the initiative to wash their hands after applying the pad, and Subject B did not yet understand how to properly dispose of the pad wrapper. The practice results show that children with intellectual disability tend to focus on the main task while neglecting the accompanying supporting sanitation activities. Flores-Medina et al. (2022) found that the menstrual management experiences of children with special needs vary widely and require deep understanding from the surrounding environment to avoid broader negative impacts. This is further reinforced by Elfiyani et al. (2024), who found that adolescent girls with intellectual disability change their pads only when full, with an average frequency of only twice a day.

3.2.3 Interview with Homeroom Teacher on Students' Menstrual Hygiene

In implementing instruction, a combination of task analysis strategy, modeling method, gradual assistance (prompting and fading), and repeated practice (drill) proved effective in supporting the subjects' independence. A systematic review by Randall et al. (2024) confirms that the application of task analysis combined with the use of concrete media can significantly improve pad-changing skills and independence in menstrual management among children with intellectual disability. The use of visual media in menstrual hygiene instruction also supports the findings of this study. Pratiwi and Anggraeny (2025) demonstrated that applying task analysis with video tutorial media had a positive effect on the self-care ability of children with moderate intellectual disability in using pads, with a Percentage of Non-overlapping Data (PND) value of 100%. Research by Harisa and Wahyuni (2020) also showed that video-based instruction significantly improved menstrual hygiene practice among female students with intellectual disability. In addition to video media, peer-group-based learning methods have also been shown to

contribute to improving understanding and skills in menstrual hygiene management among children with intellectual disability (Parinussa & Lilipory, 2024).

Knowledge, as the foundation of menstrual hygiene practice, is an important aspect that must be considered. In this study, both subjects had previously received instruction on puberty and menstrual hygiene through a doctor from the local health center invited to the school. Hasnur (2025) demonstrated that reproductive health counseling significantly improves the knowledge of adolescent girls with intellectual disability regarding menstrual hygiene. The readiness of school institutions to support responsive menstrual hygiene instruction such as involving health workers from the local health center and providing menstrual education facilities is a positive step. Anggraini et al. (2025) noted that school readiness, through the provision of menstrual education facilities and teacher training, is a fundamental basis for improving the effectiveness of reproductive health education for female students with intellectual disability. Inclusive teachers already understand appropriate teaching methods for adolescent girls with mild intellectual disability, but do not yet have a comprehensive understanding of the sexuality education material that has been provided (Eka Putri et al., 2024). Overall, the results of this study confirm that adolescent girls with mild intellectual disability have the potential to learn and develop independence in maintaining menstrual hygiene. This success depends on structured strategies at school, parental support, and adequate environmental support. Indriyani and Sukinah (2026) emphasized that the effectiveness of self-care instruction is determined not only by the quality of teaching materials, but also by the environment, the intensity of teacher mentoring, student motivation, and family involvement.

4. Conclusion

The findings of this study show that adolescent girls with mild intellectual disability display varying levels of proficiency in menstrual hygiene. Subject A was able to use a pad correctly without assistance, while Subject B still needed help with several steps due to intellectual and motor factors, as well as her habit of being assisted at home. The results of this study also show that effective learning methods increase children's independence. In addition, the role of teachers, parental cooperation, and a responsive school environment are very important in helping students learn menstrual hygiene. However, the school and parents must also work to instill other supporting behaviors in both subjects, such as washing hands and disposing of pads properly.

References

Anggraini, D., Sari, I. P., & Nursanti, I. (2025). Meningkatkan Kesiapan Sekolah dalam Edukasi Kesehatan Reproduksi bagi Siswi Tunagrahita: Studi Pengabdian di SLB Jakarta Pusat. Mestaka: Jurnal Pengabdian Kepada Masyarakat, 4(4), 476–484. https://doi.org/10.58184/mestaka.v4i4.746

Assyakurrohim, D., Ikhram, D., Sirodj, R. A., & Afgani, M. W. (2022). Metode Studi Kasus dalam Penelitian Kualitatif. Jurnal Pendidikan Sains dan Komputer, 3(01), 1–9. https://doi.org/10.47709/jpsk.v3i01.1951

Eka Putri, V., Martha, E., & Erwandi, D. (2024). Analisis Pelaksanaan Pendidikan Kesehatan Reproduksi dan Seksualitas pada Siswa Remaja dengan Disabilitas Intelektual di SLB X dan SLB Y Kota Depok. Jurnal Kesehatan Tambusai, 5(4), 11881–11898. https://doi.org/10.31004/jkt.v5i4.37763

Flores-Medina, M. D. R., Valdez-Martinez, E., & Márquez-González, H. (2022). Qualitative Focus Groups with Professionals of Special Education and Parents of Young Females with Intellectual Disability Exploring Experiences with Menstrual Hygiene Management and the Trigger for the Non-Therapeutic Hysterectomy in Mexico. Healthcare, 10(9), 1690. https://doi.org/10.3390/healthcare10091690

Hasnur, H. (2025). Pengaruh Penyuluhan Kesehatan Reproduksi Terhadap Pengetahuan Remaja Putri Tentang Higienis Saat Menstruasi Pada Siswa Tunagrahita. 4.

Heryati, E., Romadona, N. F., Nitiya, N., & Meiyani, N. (2024). Improving menstrual hygiene management for adolescents with disabilities through parental assistance. Transformasi: Jurnal Pengabdian Masyarakat, 20(2), 280–290. https://doi.org/10.20414/transformasi.v20i2.10447

Indriyani, L., & Sukinah, S. (2026). Validated Intervention Mapping Module for Menstrual Hygiene Skills: Modul Intervention Mapping Tervalidasi untuk Keterampilan Menstrual Hygiene. Pedagogia: Jurnal Pendidikan, 15(2), 207–221. https://doi.org/10.21070/pedagogia.v15i2.2216

Jenisha, A., Sugumaran, A., Ramanathan, M., Chellamuthu, L., Asokan, K., & Narayanaswamy, S. (2026). A cross-sectional study on menstrual health difficulties and premenstrual symptomatology in adolescent girls with intellectual disability: A salutogenic public health perspective. Frontiers in Public Health, 14, 1771244. https://doi.org/10.3389/fpubh.2026.1771244

Kaliszewski, K., Diakowska, D., Wojtczak, B., Strutyńska-Karpińska, M., Domosławski, P., Sutkowski, K., Głód, M., Balcerzak, W., Forkasiewicz, Z., & Łukieńczuk, T. (2016). Fine-Needle Aspiration Biopsy as a Preoperative Procedure in Patients with Malignancy in Solitary and Multiple Thyroid Nodules. PLOS ONE, 11(1), e0146883. https://doi.org/10.1371/journal.pone.0146883

Khotimah Elfiyani, N., Kusumayati, A., Endah Wuryaningsih, C., & Nazaruddin Siregar, K. (2024). Menstrual Personal Hygiene Behavior Among Adolescents with Physical and Intellectual Disabilities. Kesmas National Public Health Journal, 19(2). https://doi.org/10.21109/kesmas.v19i2.1351

Nafikadini, I., & Paramarta, D. (2021). Pola Asuh Ibu dalam Kebersihan Organ Reproduksi selama Menstruasi pada Remaja Tunagrahita. Jurnal Kesehatan, 8(3), 208–219. https://doi.org/10.25047/j-kes.v8i3.193

Nurahma, G. A., & Hendriani, W. (2021). Tinjauan sistematis studi kasus dalam penelitian kualitatif. Mediapsi, 7(2), 119–129. https://doi.org/10.21776/ub.mps.2021.007.02.4

Parinussa, N., & Lilipory, M. (2024). PKM Manajemen Kebersihan Menstruasi Melalui Pendekatan Video Based Instructions dan Peer Group Support di SLB. 5.

Pratiwi, A. L., & Anggraeny, D. (2025). Pengaruh Penerapan Analisis Tugas Bermedia Video Tutorial Terhadap Kemampuan Merawat Diri Anak Tunagrahita Sedang.

Puspitasari, S. V., Novianti, L. E., & Agustiani, H. (2020). Pubertas Menurut Perspektif Remaja Putri dengan Disabilitas Intelektual. Psikostudia: Jurnal Psikologi, 9(3), 237–250. https://doi.org/10.30872/psikostudia.v9i3.4165

Randall, K. N., Hopkins, C. S., & Drew, H. (2024). Menstrual education programs for girls and young women with intellectual and developmental disabilities: A systematic review. Journal of Applied Research in Intellectual Disabilities, 37(4), e13264. https://doi.org/10.1111/jar.13264

Sari, B. N., Jaya, I., & Mulyeni, T. (2023). Meningkatkan Kemampuan Menggunakan Pembalut pada Siswa dengan Hambatan Intelektual Kelas VII - C1 di SLBN 12 Jakarta Menggunakan Metode Simulasi.

Wahyuni, E. S., & Diana Harisa, W. O. (2020). Video Based Instructions Meningkatkan Praktik Kebersihan Diri Saat Menstruasi Pada Siswi Disabilitas Intelektual. Jurnal Keterapian Fisik, 5(2), 62–70. https://doi.org/10.37341/jkf.v5i2.235

Wihdaturrahmah, & Chuemchit, M. (2023). Determinants of Menstrual Hygiene Among Adolescent School Girls in Indonesia. International Journal of Women's Health, 15, 943–954. https://doi.org/10.2147/IJWH.S400224

Wilbur, J., Kayastha, S., Mahon, T., Torondel, B., Hameed, S., Sigdel, A., Gyawali, A., & Kuper, H. (2021). Qualitative study exploring the barriers to menstrual hygiene management faced by adolescents and young people with a disability, and their carers in the Kavrepalanchok district, Nepal. BMC Public Health, 21(1), 476. https://doi.org/10.1186/s12889-021-10439-y